

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 21 OF 186

(check only one)

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Hoyer for Congress

Full Name (Last, First, Middle Initial)

Francine L. Coles

A.

Mailing Address 5819 E Calle Del Media

City

Phoenix

State

AZ

Zip Code

85018-4657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1750.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03    |   | 31    |   | 2014        |

Transaction ID : VNVNK9NYR03

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Adam Goodman

B.

Mailing Address 9829 N 49th Pl

City

Paradise Valley

State

AZ

Zip Code

85253-1005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02    |   | 24    |   | 2014        |

Transaction ID : VNVNK9JFG03

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

J. Richard Lilly

C.

Mailing Address 5804 Baltimore Ave

City

Hyattsville

State

MD

Zip Code

20781-1623

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

Physician

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3520.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02    |   | 06    |   | 2014        |

Transaction ID : VNVNK9K2N03

Amount of Each Receipt this Period

920.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1920.00